

<b>CLAIMS ONLY</b>							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2		/					52						
3		/					53						
4		/					54						
5		/					55						
6		/					56						
7		/					57						
8		/					58						
9		/					59						
10		/					60						
11		/					61						
12		/					62						
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15		/					65						
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17		/					67						
18		/					68						
19		/					69						
20		/					70						
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26		/					76						
27		/					77						
28		/					78						
29		/					79						
30		/					80						
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32		/					82						
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35		/					85						
36		/					86						
37		/					87						
38		/					88						
39		/					89						
40		/					90						
41		/					91						
42		/					92						
43		/					93						
44		/					94						
45		/					95						
46		/					96						
47		/					97						
48		/					98						
49		/					99						
50		/					100						
TOTAL IND.	5						TOTAL IND.	6					
TOTAL DEP.	45						TOTAL DEP.	32					
TOTAL CLAIMS	50						TOTAL CLAIMS	38					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS